## Case 19-12325-mdc Doc 44 Filed 09/09/19 Entered 09/09/19 15:26:01 Desc Main Document Page 1 of 2

Fill	in this informs	ition to identify ye	nur caser											
		Kathleen E (												
Deb	otor 1	(Metros)		Ch		this is:								
Deb	otor 2							amended filing						
:	ouse, if filing)				· · · · · · · · · · · · · · · · · · ·				ing postpetition chapter ne following date:					
Unit	ed States Bankı	ruptcy Court for the	: EASTE	RN DISTRICT OF PENNS	YLVANIA		MM	/ DD / YYYY						
!	e number 19	9-12325												
O	fficial Fo	orm 106J		THE STATE OF										
		J: Your	Evnor											
Be info	as complete ormation. If m mber (if know	and accurate as	possible eded, atta ry question	. If two married people ar ch another sheet to this	e filing together, bo form. On the top of	oth are ec any addi	qually tional	responsible for pages, write yo	12/15 supplying correct our name and case					
1.	Is this a joir			,										
	■ No. Go to	line 2. s Debtor 2 live i	in a senar	ate household?										
			iii a sepaii	ate fiouseficia :										
		☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses for Separate Household</i> of Debtor 2.												
2.	Do you have	e dependents?	□ No											
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2			Dependent's age	Does dependent live with you?					
	Do not state	the						***************************************	□ No					
	dependents	names.			Son			18	■ Yes					
									□ No					
					· · · · · · · · · · · · · · · · · · ·				☐ Yes					
									□ No					
									☐ Yes					
									□ No					
	_								☐ Yes					
3.	expenses o yourself and	penses include f people other t d your depende	han nts? □	No Yes										
Par	t.2: Estim	ate Your Ongoi	ng Monthl	y Expenses										
exp	imate your ex enses as of a sticable date.	openses as of your address as a date after the l	our bankri bankruptc	uptcy filing date unless y y is filed. If this is a supp	ou are using this fo plemental <i>Schedule</i>	orm as a : J, check	supple the b	ement in a Chap ox at the top of	oter 13 case to report the form and fill in the					
the	lude expense value of sucl ficial Form 10	h assistance an	non-cash : d have inc	government assistance i luded it on S <i>chedule I:</i> \	f you know <i>'our Income</i>			Your expe	nses					
4.		or home owners and any rent for the		<b>ses for your residence.</b> I r lot.	nclude first mortgage	4.	\$		1,187.00					
	If not includ	led in line 4:												
	4a. Real e	estate taxes				4a.	\$		0.00					
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b.			0.00					
				ipkeep expenses		4c.	\$ _	The second	0.00					
	4d. Home	owner's associat	tion or cond	dominium dues		4d.	_		0.00					
5.	Additional r	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00					

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Debtor 1 Kathleen E Gosser	Case nun	nber (if known)	19-12325
6. Utilities:			
6a. Electricity, heat, natural gas	6a	\$	275.00
6b. Water, sewer, garbage collection	6b.		125.00
6c. Telephone, cell phone, Internet, satellite, and cable servi			
6d. Other. Specify:	6d.		60.00
Food and housekeeping supplies	7.		0.00
Childcare and children's education costs	8.		400.00
Clothing, laundry, and dry cleaning			0.00
D. Personal care products and services	9.	·	60.00
Medical and dental expenses	10.		50.00
Transportation. Include gas, maintenance, bus or train fare.	11.	\$	50.00
Do not include car payments.	12.	\$	200.00
<ol> <li>Entertainment, clubs, recreation, newspapers, magazines,</li> </ol>			50.00
Charitable contributions and religious donations	14.	·	
insurance,	14.	Ψ	0.00
Do not include insurance deducted from your pay or included in	lines 4 or 20.		
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.		0.00
15c. Vehicle insurance	15c.	`	70.00
15d. Other insurance. Specify:	15d.		
Taxes. Do not include taxes deducted from your pay or included		<b>*</b>	0.00
Specify:	16.	\$	0.00
. Installment or lease payments:		*	0.00
17a. Car payments for Vehicle 1	17a.	\$	0.00
17b. Car payments for Vehicle 2	17b.	` <del></del>	0.00
17c. Other. Specify:	17c.		0.00
17d. Other. Specify:	17d.		0.00
Your payments of alimony, maintenance, and support that		Ψ	0.00
deducted from your pay on line 5, Schedule I, Your Income	(Official Form 106I).	\$	0.00
Other payments you make to support others who do not liv	e with you.	\$	0.00
Specify:	19.		0.00
Other real property expenses not included in lines 4 or 5 of	this form or on Schedule I: Ye	our Income.	
20a. Mortgages on other property	20a.		0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	·	0.00
Other: Specify:	04	+\$	0.00
		**	<u> </u>
Calculate your monthly expenses			
22a. Add lines 4 through 21.		\$	2,527.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from	Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expense	s.	\$	2,527.00
Calculate various magnétalis mat his			
Calculate your monthly net income.			
23a. Copy line 12 (your combined monthly income) from Sche			2,693.16
23b. Copy your monthly expenses from line 22c above.	23b.	<b>-\$</b>	2,527.00
22a Cubing at your monthly are			
23c. Subtract your monthly expenses from your monthly incom	ne. 23c.	\$	166.16
The result is your monthly net income.	230.		100.10
Do you expect an increase or decrease in your expenses w For example, do you expect to finish paying for your car loan within the y modification to the terms of your mortgage?	ithin the year after you file this ear or do you expect your mortgage	s form? payment to incre	ease or decrease because o
, , , , , , , , , , , , , , , , , , , ,			
No			
☐ Yes. Explain here:			-